## Barrington Recreation Department 281 County Road, Barrington – (401) 247-1925

## APPLICATION FOR EMPLOYMENT

(Please Print)

Name:			D	ate:	
	Idress: Phone Number:				
Email://			Birthd	ate:	
EDUCATION	Name of School	Year Graduated	Course of Study Major/Minors	Diploma/Degree Awarded	
High School					
College					
Other Training					
Position you are a	pplying for:	I		1	
Which age group v	vould you like to wo	ork with?:			
What activities are	you qualified to ins	truct?:			
List any special tr for which you are		, which you have at		es to the position	
	1 11	14.1 1 1	`		
1.)	ude name, address ar	na telephone number	·)		

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PLEASE NOTE: All new applicants must undergo a background investigation. Please submit that document (completed and notarized) along with this application and your resume to the Barrington Recreation Department.

Pursuant to RI law, the Town of Barrington is subject to the provisions of the Workers' Compensation Act. The Town of Barrington is an equal opportunity employer. The Town does not discriminate on the basis of race, color, national origin, sex, religion, age, sexual orientation or disability in employment or the provision of services.